Entity Name: WOMEN'S & MATERNITY CARE SPECIALISTS OF ORLANDO, LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

4010 W. BOY SCOUT BLVD SUITE 500 TAMPA, FL 33607

Current Mailing Address:

DOCUMENT# L13000133281

4010 W. BOY SCOUT BLVD SUITE 500 TAMPA, FL 33607 US

FEI Number: 32-0421367

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

	Electronic Signature of Registered Agent		
Authorized Person(s) Detail :			
Title	MEMBER	Title	CFO
Name	FLORIDA WOMAN CARE, LLC	Name	WRIGHT, BRIAN
Address	4010 W. BOY SCOUT BLVD SUITE 500	Address	4010 W. BOY SCOUT BLVD SUITE 500
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN WRIGHT

CHIEF FINANCIAL OFFICER 04/08/2024

Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date